HOUSE BILL No. 1220

DIGEST OF INTRODUCED BILL

Citations Affected: IC 36-8-14.5.

Synopsis: Insurance for volunteer EMTs. Requires a county, municipality, or township that uses a volunteer ambulance company to purchase a policy of insurance to cover each volunteer emergency medical technician who is a member of the volunteer ambulance company.

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Effective: January 1, 2005.

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January 15, 2004, read first time and referred to Committee on Local Government.

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Second Regular Session 113th General Assembly (2004)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2003 Regular Session of the General Assembly.

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HOUSE BILL No. 1220

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A BILL FOR AN ACT to amend the Indiana Code concerning local government.

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Be it enacted by the General Assembly of the State of Indiana:

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[SECTION 1. IC 36-8-14.5 IS ADDED TO THE INDIANA CODE
2	AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
3	JANUARY 1, 2005]:

Chapter 14.5. Volunteer Emergency Medical Technicians Sec. 1. This chapter applies to all units.

- Sec. 2. As used in this chapter, "member" means a person:
 - (1) who, as a result of a written application, has been elected or appointed to membership with a provider;
 - (2) who, without compensation or with only nominal compensation, performs the work related duties assigned and orders given to the person by the chief executive officer of the provider, including orders or duties involving education and training as prescribed by the provider or the state; and
 - (3) whose name has been entered on a roster of volunteer emergency medical technicians that is kept by the provider and that has been approved by the proper officers of the provider.



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1	Sec. 3. As used in this chapter, "nominal compensation" means	
2	an annual compensation of not more than three thousand five	
3	hundred dollars (\$3,500).	
4	Sec. 4. As used in this chapter, "provider" means a volunteer	
5	ambulance company that has as a member an emergency medical	
6	technician or other person working in a volunteer capacity.	
7	Sec. 5. As used in this chapter, "volunteer ambulance company"	
8	means a department or an association:	
9	(1) that is:	
0	(A) organized as a nonprofit corporation or an	
.1	unincorporated association; or	
2	(B) created by a governmental unit;	
3	to provide emergency medical services, including	
4	transportation of ill or injured persons; and	
.5	(2) in which the majority of members of the department or	
6	association:	
7	(A) do not receive compensation; or	
8	(B) receive only nominal compensation for the members'	
9	services.	
20	Sec. 6. (a) Each unit that has a provider shall procure insurance	
21	in the name of and for the benefit of each member. However, if a	
22	contract or an agreement exists between a unit and a provider, the	
23	contract or agreement must provide for insurance of the provider's	
24	members in the amounts, and including the coverage, required by	
25	this chapter.	
26	(b) Unless the contract or agreement stipulates otherwise, all	
27	insurance coverage required under this chapter must be purchased	
28	under a group plan. Either the unit or the provider, according to	V
29	the contract or agreement, may undertake procurement of the	
0	required insurance. In either case, the costs of coverage must be	
1	borne by the unit. If a provider serves more than one (1) unit under	
32	a contract or an agreement, each unit that the provider serves shall	
33	pay the amount for the insurance coverage determined under the	
34	following formula:	
35	STEP ONE: For each census block or other area in a unit that	
66	is served by more than one (1) provider, divide the population	
37	of the area by the number of providers serving the area and	
8	round the quotient to the nearest one-thousandth (0.001).	
9	STEP TWO: Add the quotients determined under STEP ONE	
10	for the unit.	
1	STEP THREE: Determine the sum of the STEP TWO	
12	amounts for all the units served by the same provider.	



1	STEP FOUR: Divide the STEP TWO amount for a unit by the
2	STEP THREE amount and round the quotient to the nearest
3	one-thousandth (0.001).
4	STEP FIVE: Multiply the costs of the insurance coverage for
5	the provider by the quotient determined under STEP FOUR,
6	rounded to the nearest dollar.
7	(c) A diminution of insurance benefits shall not be allowed to
8	occur under this section because of a change in the insurance
9	carrier or a change as to the person that actually procures the
10	required insurance.
11	Sec. 7. A policy of insurance required by this chapter must
12	provide for payment to a member working for a provider, for
13	accidental injury caused by or occurring in the course of the
14	performance of the duties of a member, and for a cardiac disease
15	event proximately caused by and occurring within forty-eight (48)
16	hours of or occurring in the course of the performance of the duties
17	of a member, of the following:
18	(1) For total disability that prevents the member from
19	pursuing the member's usual vocation, a weekly indemnity of
20	at least two hundred fifty dollars (\$250) for a maximum of
21	two hundred sixty (260) weeks.
22	(2) For medical expenses, coverage for incurred expenses.
23	However, the policy may not contain medical expense limits
24	of less than seventy-five thousand dollars (\$75,000).
25	Sec. 8. A policy of insurance required by this chapter must
26	provide for the payment of at least one hundred fifty thousand
27	dollars (\$150,000) to the beneficiary, the beneficiaries, or the estate
28	of a member if the member dies from:
29	(1) an injury sustained while in the performance of the
30	member's duties as a volunteer emergency medical
31	technician; or
32	(2) a cardiac disease event:
33	(A) proximately caused by, and occurring within
34	forty-eight (48) hours of; or
35	(B) occurring while in;
36	the performance of the member's duties as a volunteer
37	emergency medical technician.
38	Sec. 9. (a) A policy of insurance required by this chapter must
39	provide for the payment of at least one hundred fifty thousand
40	dollars (\$150,000) to the member if the member becomes totally
41	and permanently disabled for a continuous period of at least two

hundred sixty (260) weeks as a result of an injury occurring in the



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1	performance of the member's duties as a volunteer emergency	
2	medical technician. An amount paid to a member under section	
3	7(1) of this chapter is a credit against benefits payable under this	
4	subsection.	
5	(b) The policy of insurance must also provide for	
6	indemnification to a member who becomes partially and	
7	permanently disabled or impaired as a result of an injury	
8	occurring in the performance of the member's duties as a volunteer	
9	emergency medical technician.	
10	(c) For purposes of this section, partial and permanent disability	
11	or impairment must be indemnified as a percentage factor of a	
12	whole person.	
13	Sec. 10. All expenses incurred for premiums of the insurance	
14	required by this chapter must be paid out of the general fund of the	
15	unit in the same manner as other expenses of the unit are paid.	
16	Sec. 11. If:	
17	(1) a unit fails to provide for a member the insurance required	
18	by this chapter; and	
19	(2) a member suffers a loss of the type that the insurance	
20	would have covered;	
21	the unit shall pay to the member the amount of money that the	
22	insurance would have paid to the member.	
23	Sec. 12. (a) Each unit that has a provider may procure an	
24	insurance policy or another type of instrument that provides	
25	retirement benefits as an incentive to members for continued	
26	service.	
27	(b) An insurance policy or other instrument containing	
28	provisions authorized by subsection (a) may not be considered in	V
29	the computation of nominal compensation for purposes of this	
30	chapter.	
31	(c) A member who is covered by an insurance policy or other	
32	instrument containing provisions authorized by subsection (a) is	
33	not eligible for membership in the public employees' retirement	
34	fund under IC 5-10.3 on the basis of that coverage.	
35	Sec. 13. Each unit that has a provider may procure an insurance	
36	policy for the benefit of auxiliary groups whose members could be	
37	injured while assisting the provider's members in the performance	



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of the provider's members' duties.